

RECEIVED
CENTRAL FAX CENTER

JAN 09 2006

Atty. Dkt. No. 041673-2115

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tuszynski, Mark H.
Title: METHODS FOR THERAPY
OF
NEURODEGENERATIVE
DISEASE OF THE BRAIN
Appl. No.: 10/748,337
Appl. Filing Date: 12/29/2003
Examiner: Lieto, Louis D.
Art Unit: 1632

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Rachel Caputo (Printed Name) <i>Rachel Caputo</i> (Signature) 1/9/06 (Date of Deposit)
--

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. § 141, or the commencement of a civil action under 35 U.S.C. § 145 or § 146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. § 1.114: (check items that apply)

01/11/2006 EFLORES 00000040 500872 10748337
01 FC:2801 395.00 DA

Atty. Dkt. No. 041673-2115

a. Previously submitted:

- ☒ Please enter and consider the amendment and/or reply previously filed on November 8, 2005.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ___ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply previously filed on ___.
- ☐ Other ____.

b. Enclosed are:

- ☐ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of ___ listed reference(s).
- ☒ Other: Response to Notice of Non-Compliant Amendment Dated 12/14/2005.

Miscellaneous:

- ☒ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of three (3) months.

The filing fee is calculated below:

RECEIVED
CENTRAL FAX CENTER

Atty. Dkt. No. 041673-2115

JAN 09 2006

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	15	- 20	= 0	x \$50.00	= \$0.00
Independents	1	- 3	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1,136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$120.00	0	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$450.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:				\$0.00
EXTENSION FEE ALREADY PAID: -				\$0.00
EXTENSION FEE TOTAL				\$0.00
CLAIMS AND EXTENSION FEE TOTAL:				\$790.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract 1/2 of above):			\$395.00
<input checked="" type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$130.00
TOTAL FEE:				\$525.00

☒ Please charge Deposit Account No. 50-0872 in the amount of \$525.00. A duplicate copy of this transmittal is enclosed.

Atty. Dkt. No. 041673-2115

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

1-9-06

By



FOLEY & LARDNER LLP

Customer Number: 30542

Telephone: (858) 847-6720

Facsimile: (858) 792-6773

Stacy L. Taylor

Attorney for Applicant

Registration No. 34,842